



MEMPHIS AMBASSADORS PROGRAM

FIELD TRIP PARTICIPATION FORM

I, _____, the parent, guardian, or
(Name of Parent, Guardian, or Legal Custodian)

legal custodian of _____, who resides
(Name of MAP Participant under age of 18)

at _____, do hereby
(address)

give my permission for him or her to participate in any and all approved Memphis
Ambassadors Program (MAP) field trips.

Print Name of Parent, Guardian, or Legal Custodian

Date

Signature